FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1			ORGANIZATION					
		(See instructions)					Office use only	
	ME OF DMMITTEE (ii	n full)		(Check if name is changed)	Exar over	nple: If typying, type the lines	12FE4M5	
Cit	tigroup Inc	. Politica ⊮State)	al Action C	ommittee - Fe	deral/Sta	te (Citigroup		
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3. FEC IDENTIFICATION NUMBER C C00039305								
4. IS	THIS STATE	MENT	NEW	(N) OR	X	AMENDED (A)		
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NOTE: S	Submission of	alse, erron				ne person signing this State		
	Office Use Only					For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)